RI SOS Filing Number: 202576268820 Date: 6/20/2025 2:44:00 PM



State of Rhode Island Department of State - Business Services Division

Articles of Amendment

DOMESTIC Limited Liability Company

→ Filing Fee: \$50.00

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Pursuant to the provisions of RIGL amends its Articles of Organization	. <u>7-16-12</u> the undersigned limited liability company hereby as follows:		
Entity ID Number:	2. The name of the limited liability company is:		
001703899	Quahog Investments LLC		
If the entity's name is changing state the new name:			
	Check the box to indicate no change		
 If the principal office address of the entity is changing, complete the following section: 			
	Check the box to indicate no change		
5. If the period of duration is chan	ging, complete the following section: CHECK ONE BOX ONLY		
Perpetual (on-going)			
Date certain for dissolution _	Check the box to indicate no change		
6. If the entity's tax status is chan	ging, complete the following section: CHECK ONE BOX ONLY		
Partnership or			
A corporation or			
Disregarded as an entity sep	arate from its member(s)		
	Check the box to indicate no change 🗹		
7. If the management structure is	changing, complete the following section:		
The Limited Liability Company is	to be managed by: CHECK ONE BOX ONLY		
Its member(s) (If you have c	hecked this box, skip to Section 7. DO NOT fill out the chart below.)		
One (1) or more manager(s) of Amendment, state the nar	(If the limited liability company has manager(s) at the time of the filing of these Articles ne and address of each manager on the next page.)		

JUN 20 2025

BY: 959WAN

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

MANAGER	ADDRESS				
Tommy Muth	1276 Bald Hill Rd, Unit 15 #1059, Warwick, RI 02886				

Check the box to indicate no change					
8. If adding or amending additional provisions, complete the following section:					
		Check the	box to indicate no change		
9. As required by RIGL <u>7-16-67</u> , the entity has paid all fees and taxes.					
10. Date when these Articles of Ar	mendment will be effective:	CHECK ONE BOX ONLY			
☑ Date received (Upon filing)	✓ Date received (Upon filing)				
Later effective date (Date must be no more than 90 days from the date of filing)					
14. 1					
under penalty of perjury, I declare accompanying attachments, and t	and affirm that I have exame that all statements contained	nined these Articles of Amendm I herein are true and correct.	ent, including any		
accompanying attachments, and the Name of Authorized Person	a and affirm that I have exan that all statements contained	nined these Articles of Amendme d herein are true and correct. Street Address	ent, including any		
accompanying attachments, and t	e and affirm that I have exan that all statements contained	d herein are true and correct.	ent, including any		
accompanying attachments, and to Name of Authorized Person	e and affirm that I have exan that all statements contained	Street Address	ent, including any Zip Code		
accompanying attachments, and to Name of Authorized Person Jeremy Sylvester	e and affirm that I have exan that all statements contained	Street Address 6 Excalibur Drive			
accompanying attachments, and to Name of Authorized Person Jeremy Sylvester City/Town	e and affirm that I have exan that all statements contained	Street Address 6 Excalibur Drive State	Zip Code		

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I, GREGG M. AMORE, Secretary of State of the State of Rhode Island, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

June 20, 2025 02:44 PM

Gregg M. Amore

Tregs M. Coure

Secretary of State

